

Fill in this information to identify your case:

United States Bankruptcy Court for the:

District of Oregon

Case number (if known): _____

Chapter you are filing under:

- ☐ Chapter 7
☒ Chapter 11
☐ Chapter 12
☐ Chapter 13

☐ Check if this is an
amended filing

Official Form 201**Voluntary Petition for Non-Individuals Filing for Bankruptcy****06/22**

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. **Debtor's name** Heritage Specialty Foods, LLC

2. **All other names debtor used in the last 8 years**

Include any assumed names, trade names, and *doing business as* names

3. **Debtor's federal Employer Identification Number (EIN)** 26-2538554

4. **Debtor's address**

Principal place of business6433 SE Lake Rd.

Number Street

Portland OR 97222

City State ZIP Code

Clackamas County

County

Mailing address, if different from principal place of businessPO Box 301277

Number Street

P.O. Box

Portland OR 97294

City State ZIP Code

Location of principal assets, if different from principal place of business

Number Street

City State ZIP Code

5. **Debtor's website (URL)** www.heritagespecialtyfoods.com

6. **Type of debtor**

- ☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify: _____

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.

See <http://www.naics.com/search/>.

3119

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
☐ Chapter 9
☒ Chapter 11. Check all that apply:

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☒ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

☒ No

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY
District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

☒ No

☐ Yes. Debtor _____ Relationship _____
District _____ When _____
MM / DD / YYYY
Case number, if known _____

List all cases. If more than 1, attach a separate list.

11. Why is the case filed in *this district*?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

- ☒ No
- ☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____

Where is the property?

Number _____ Street _____
City _____ State _____ ZIP Code _____

Is the property insured?

- ☐ No
- ☐ Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input checked="" type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated assets

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor Heritage Specialty Foods, LLC
Name

Case number (if known) _____

16. Estimated liabilities

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 06/23/2023
MM / DD / YYYY

X /s/ Shane Hendren

Signature of authorized representative of debtor

Shane Hendren

Printed name

Title President & CEO

18. Signature of attorney

X /s/ Stephen Raher

Signature of attorney for debtor

Date 06/23/2023

MM / DD / YYYY

Stephen Raher

Printed name

Leonard Law Group LLC

Firm name

4110 SE Hawthorne Blvd. PMB #506

Number Street

Portland

City

OR

State

97214-5246

ZIP Code

9716340190

Contact phone

sraher@llg-llc.com

Email address

095625

Bar number

OR

State

Fill in this information to identify the case:

Debtor name Heritage Specialty Foods, LLC

United States Bankruptcy Court for the: District of Oregon (State)

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*\$ 3,543,966.00**1b. Total personal property:**Copy line 91A from *Schedule A/B*\$ 5,623,849.49**1c. Total of all property:**Copy line 92 from *Schedule A/B*\$ 9,167,815.49**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*\$ 3,298,856.51**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 6a of *Schedule E/F*\$ 5,405.94**3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F*+\$ 4,087,902.53**4. Total liabilities**

Lines 2 + 3a + 3b

\$ 7,392,164.98

Fill in this information to identify the case:Debtor name Heritage Specialty Foods, LLCUnited States Bankruptcy Court for the: District of Oregon

Case number (If known): _____

☐ Check if this is an amended filing**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders****12/15**

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
1	Zions Bancorporation, N.A. dba The Commerce Bank of Oregon 1 S. Main St. Salt Lake City, UT, 84133		Monies Loaned / Advanced		3,960,020.00	3,150,173.00	809,847.00
2	Fisher Construction Group, Inc. 625 Fisher Ln Burlington, WA, 98233	360-757-4094 info@fishercgl.com	Damages incurred due to landlord breach of lease	Disputed Contingent			425,191.00
3	Cody Staffing 18291 N Pima Rd Ste 110-389 Scottsdale, AZ, 85255	360-718-7443 brittany@codystaffing.com	temporary labor				219,036.57
4	MedoSweet Farm , Inc P.O. Box 749 Kent, WA, 98035-0749	503-719-5215 bryanf@medosweet.com	Suppliers or Vendors				171,852.03
5	Fill Tech Inc 11401 Belcher Road S 230 Largo, FL, 33773	727-572-8550	Suppliers or Vendors				101,250.00
6	Dustin D. Lewis 4292 SE Augusta Loop Gresham, OR, 97080	503-830-4901 dustin@ddlit.com	Services				99,799.66
7	Morasch's Meats 4050 NE 158th Ave. Portland, OR, 97230		Suppliers or Vendors				88,865.70
8	Nates Fine Food 8880 Industrial Ave, Ste 100 Roseville, CA, 95678	916-742-6700 nate@natesfinefoods.com	Suppliers or Vendors				79,582.08

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
9	GLISS 10998 SW 68th Pkwy Portland, OR, 97223-8691	503-719-5962 jamie@general-lbr.com	Suppliers or Vendors				68,803.93
10	Alpine Food Distributing, Inc. P.O.Box 22529 Milwaukie, OR, 97269	503-230-2883 mmullennix@alpinefoods.com	Suppliers or Vendors				58,432.95
11	Garden Fresh Foods Inc 14316 NE 203rd St Woodinville, WA, 98072	425-483-5467 mark@gardenfreshfoods.com	Suppliers or Vendors				51,356.40
12	Amcor Plastics 24815 Network Pl. Chicago, IL, 60673-1248	Jon Pietsch 888-800-5734 jon.pietsch@amcor.com	Suppliers or Vendors				49,165.70
13	Columbia Corrugated Box 12777 SW Tualatin-Sherwood Rd Tualatin, OR, 97062	503-692-3344 johnb@ccbox.com	Suppliers or Vendors				46,900.86
14	Fra' Mani Handcrafted Foods 1311 8th St. Berkeley, CA, 94710	510-526-7000	Suppliers or Vendors				43,657.18
15	TCI Business Capital c/o NW Employment Solutions P.O. Box 9149 Minneapolis, MN, 55480-9149	kasey@nwesjobs.com	Temporary staffing services				40,153.76
16	Woodland Foods 3751 Sunset Ave. Waukegan, IL, 60087	847-693-7559 cswets@woodlandfoods.com	Suppliers or Vendors				40,019.61
17	Beginright 3708 NE 122nd Ave Portland, OR, 97230	tbell@beginright.com	Services				38,847.10
18	Boa Logistics 6041 Bristol Pkwy, Ste 100 Culver City, CA, 90230	310-751-6003 vquevedo@boalogistics.com	Services				37,531.80
19	Santiam Ice Company 17823 S. Nestle Ln Oregon City, OR, 97045	503-679-2422	Suppliers or Vendors				37,530.00
20	Walter E Nelson Co. 5937 N. Cutter Circle Portland, OR, 97217	503-285-3037 customerservice@walterenelson.com	Suppliers or Vendors				37,410.60

Fill in this information to identify the case:Debtor name Heritage Specialty Foods, LLCUnited States Bankruptcy Court for the: District of Oregon

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand**\$ 0.00**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. <u>Bank of America</u>	<u>Checking</u>	<u>1 6 4 8</u>	\$ <u>2,000.00</u>
3.2. <u>See continuation sheet</u>			\$ <u>2,164.25</u>

4. Other cash equivalents (Identify all)

4.1. _____	\$ _____
4.2. _____	\$ _____

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$ 4,164.25**Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes. Fill in the information below.

Current value of debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. <u>Landlord security deposit</u>	\$ <u>92,217.00</u>
7.2. _____	\$ _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. Deposit for purchase of pouch machine (PakSource Global) \$ 224,225.008.2. See continuation sheet \$ 232,862.65**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$ 549,304.65**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**11a. 90 days old or less: 844,467.80 - 0.00 = → \$ 844,467.80
face amount doubtful or uncollectible accounts11b. Over 90 days old: 0.00 - 0.00 = → \$ 0.00
face amount doubtful or uncollectible accounts**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 844,467.80**Part 4: Investments****13. Does the debtor own any investments?**☐ No. Go to Part 5.☒ Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____ \$ _____

14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. Heritage Logistics Company, LLC 80.00 % \$ Unknown15.2. Semya, LLC 38.00 % \$ Unknown**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

16.1. _____ \$ _____

16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ 0.00

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
- ☒ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials Ingredients	04/17/2023 MM / DD / YYYY	1,016,284.71 \$	Cost	1,016,284.71 \$
20. Work in progress Work in progress	04/17/2023 MM / DD / YYYY	41,866.99 \$	Labor cost	41,866.99 \$
21. Finished goods, including goods held for resale Packaged food	04/17/2023 MM / DD / YYYY	35,009.84 \$	Labor cost	35,009.84 \$
22. Other inventory or supplies Packaging materials	04/17/2023 MM / DD / YYYY	217,635.25 \$	Cost	217,635.25 \$
23. Total of Part 5 Add lines 19 through 22. Copy the total to line 84.				\$ 1,310,796.79

24. Is any of the property listed in Part 5 perishable?

- ☐ No
- ☒ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
- ☒ Yes. Book value 401,404.94 Valuation method Cost Current value 401,404.94

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
- ☒ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested	\$		\$
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish	\$		\$
30. Farm machinery and equipment (Other than titled motor vehicles)	\$		\$
31. Farm and fishing supplies, chemicals, and feed	\$		\$
32. Other farming and fishing-related property not already listed in Part 6	\$		\$

33. **Total of Part 6.**
Add lines 28 through 32. Copy the total to line 85.

\$

34. **Is the debtor a member of an agricultural cooperative?**

☐ No
☐ Yes. Is any of the debtor's property stored at the cooperative?

☐ No
☐ Yes

35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**

☐ No
☐ Yes. Book value \$ Valuation method Current value \$

36. **Is a depreciation schedule available for any of the property listed in Part 6?**

☐ No
☐ Yes

37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?**

☐ No
☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

☐ No. Go to Part 8.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<div>39. Office furniture Office furniture & computers</div>	\$ 52,985.00		\$ Unknown
<div>40. Office fixtures Group of servers, switches, firewalls, battery backups, server racks & assorted network & IT equipment</div>	\$	FMV	\$ 15,000.00
<div>41. Office equipment, including all computer equipment and communication systems equipment and software</div>	\$		\$
<div>42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles</div>			
42.1	\$		\$
42.2	\$		\$
42.3	\$		\$

43. **Total of Part 7.**
Add lines 39 through 42. Copy the total to line 86.

\$ 15,000.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☐ No
☒ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☐ No
☒ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
- ☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 2020 Mazda	\$ 13,200.00	Book	\$ 13,200.00
47.2 ProMaster Van	\$	Debtor's est of FMV	\$ 9,000.00
47.3	\$		\$
47.4	\$		\$
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1	\$		\$
48.2	\$		\$
49. Aircraft and accessories			
49.1	\$		\$
49.2	\$		\$
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) See continuation sheet			
	\$ 0.00		\$ 1,252,050.00
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			\$ 1,274,250.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No
- ☒ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No
- ☒ Yes

Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
- ☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 Tenant improvements	Tenant improvements	3,543,966.00 \$	Book	3,543,966.00 \$
55.2		\$		\$
55.3		\$		\$
56. Total of Part 9. Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.				3,543,966.00 \$

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☐ No
- ☒ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
- ☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets Recipes and formulations (trade secrets) created by the Debtor	\$		Unknown \$
61. Internet domain names and websites _____	\$		\$
62. Licenses, franchises, and royalties See Schedule A/B Part 10, Question 62 Attachment	\$		Unknown \$
63. Customer lists, mailing lists, or other compilations _____	\$		\$
64. Other intangibles, or intellectual property _____	\$		\$
65. Goodwill _____	\$		\$
66. Total of Part 10. Add lines 60 through 65. Copy the total to line 89.			0.00 \$

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

_____ — _____ = → \$ _____
Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

Employee retention credit (4th qtr 2020 through 2d qtr 2021)	Tax year <u>2020-21</u>	\$ <u>1,161,866.00</u>
_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____

73. Interests in insurance policies or annuities

_____ \$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Claim against landlord \$ 450,000.00

Nature of claim Breach of lease

Amount requested \$ 450,000.00

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

Potential claim against supplier \$ Unknown

Nature of claim under investigation

Amount requested \$ 0.00

76. Trusts, equitable or future interests in property

_____ \$ _____

77. Other property of any kind not already listed Examples: Season tickets, country club membership

Trail Blazers season tickets \$ 14,000.00

_____ \$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ 1,625,866.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$ 4,164.25	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ 549,304.65	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ 844,467.80	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ 0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ 1,310,796.79	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$ 15,000.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ 1,274,250.00	
88. Real property. <i>Copy line 56, Part 9.</i> ➔		\$ 3,543,966.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ 0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ 1,625,866.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 5,623,849.49	+ 91b. \$ 3,543,966.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. 9,167,815.49		\$ 9,167,815.49

Debtor 1

Heritage Specialty Foods, LLC

First Name

Middle Name

Last Name

Case number (if known)

Continuation Sheet for Official Form 206 A/B**3) Checking, savings, money market, or financial brokerage accounts**

Commerce Bank of Oregon	Money Market	5211
-------------------------	--------------	------

Balance: 2,164.25

Commerce Bank of Oregon	Checking	5122
-------------------------	----------	------

Balance: 0.00

Commerce Bank of Oregon (payroll acct)	Checking	5130
---	----------	------

Balance: 0.00

US Bank	Checking	
---------	----------	--

Balance: Unknown

Commerce Bank of Oregon	Checking	5652
-------------------------	----------	------

Balance: Unknown

8) Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Deposit for purchase of rotary machine (Fill Tech)	\$33,750.00
---	-------------

Miscellaneous prepaid expenses	\$100,264.17
--------------------------------	--------------

Employee advances	\$3,713.28
-------------------	------------

Prepaid inventory & freight	\$95,135.20
-----------------------------	-------------

50) Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

2022 STARRCO SS3000 16'x20'x10' modular office w/man doors, windows & furniture	FMV	10,000.00
---	-----	-----------

Tray line to include: VideoJet 1220 coder, 2017 FORTRESS SC-CONV-72S SHD14-BSA metal detector, WEXXAR WFPS top & bottom case taper, outfeed flex conveyor	FMV	Unknown
---	-----	---------

2021 EASTEY ET1610-48 heat tunnel		Unknown
---	--	---------

Debtor 1

Heritage Specialty Foods, LLC

Case number (if known)

First Name

Middle Name

Last Name

Continuation Sheet for Official Form 206 A/B

CROWN SX3000-30 3, 000 lb cap. walk behind stacker, s/n:10337583	FMV	3,500.00
2022 RITE-HITE Fastrax high speed roll up warehouse door	FMV	13,500.00
2022 STARRCO SS3000 16'x20'x10' modular office w/man doors, windows & furniture	FMV	10,000.00
Miscellaneous hoses, fittings, totes, bins, lockers, supplies	FMV	36,300.00
BIRO G58483 meat mixer grinder on casters	FMV	5,500.00
SPX/WAUKESHA portable shear pump w/transfer p	FMV	20,000.00
SIMPLEX cart mounted pneumatic filler	FMV	5,000.00
Group of (4) AAA METAL FAB TSK-150 160 gallon tilting steam kettles (s/n:2340)	FMV	60,000.00
BEMIS/PROPAC LiquiFlex AV2.2HF vertical fill form seal, machine (s/n:4390)	FMV	145,000.00
Group of (4) AAA METAL FAB TSK-150 160 gallon tilting steam kettles (s/n:2260)	FMV	60,000.00
BEMIS/PROPAC LiquiFlex AV2.2HF vertical fill form seal, machine (s/n:4394)	FMV	145,000.00
2018 HYSTER W45Z-HD 4,500 lb	FMV	2,250.00

Continuation Sheet for Official Form 206 A/B

cap. electric
pallet jack ,
s/n:A419N1405S

2014 PREFERRED PACKAGING HS-280-2 horizontal filling line	FMV	40,000.00
--	-----	-----------

2017 OMNI IDX ISH282-DLX-SV horizontal filling line (s/n:SSVR2330717)	FMV	60,000.00
---	-----	-----------

2017 CLEVELAND KGL-80-T 80 gallon tilting steam kettle (s/n:53670)	FMV	12,500.00
---	-----	-----------

NETHER 5 hp cart mounted transfer pump, VSD	FMV	12,500.00
---	-----	-----------

Chilling system to include: (6) 550 gallon product tanks, (1) 1,100 gallon poly mixing tank, AGC PRO2SH heat exchanger, (2) filters, (2) transfer pumps, piping, controls, catwalk	FMV	9,000.00
--	-----	----------

Group of (4) CLEVELAND/AAA METAL FAB 80 gallon tilting steam kettles	FMV	40,000.00
--	-----	-----------

Group of (20) AAA METAL FAB custom built S/S dip baskets	FMV	50,000.00
---	-----	-----------

2017 CEIA THS/PLMS21 liquid metal detector	FMV	9,500.00
--	-----	----------

NETHER 5 hp cart mounted transfer pump	FMV	12,500.00
--	-----	-----------

Group of (2) SPANCO 1 ton cap. 360 degree cap. floor mounted jib cranes	FMV	19,000.00
---	-----	-----------

Debtor 1

Heritage Specialty Foods, LLC

Case number (if known)

First Name

Middle Name

Last Name

Continuation Sheet for Official Form 206 A/B

Chilling system to include: (20) 550 gallon poly product tanks, (2) 1,100 gallon poly mixing tanks, (3) AGC PRO2SH heat exchangers, (2) filters, (4) transfer pumps, piping, controls	FMV	26,000.00
Group of (2) 2017 COLD SHOT CHILLERS ACWC-240-EM water chillers, s/n's:M062217-3; M041020-2	FMV	40,500.00
Cup line to include: FRM-1120LD vertical band sealer, VideoJet 1210 coder, 2014 FORTRESS SC-CONV-72S SHD14-SBA metal detector, S/S accumulator, S/S table, WEXXAR BEL-150 top & bottom case taper, outfeed flex conveyor	FMV	22,500.00
SCP ST600 inline top & side labeler, s/n:317940417	FMV	9,500.00
Two CROWN WP3000-45 4,500 lb cap. electric pallet jacks, s/n:10245310; s/n:10367994	FMV	4,500.00
SCHULZ SRP-4025 25 hp rotary screw air compressor w/horizontal receiver tank & MIKROPOR SDE-US-115 air dryer	FMV	8,500.00
Group of (4) CLEVELAND KGL-80-T 80 gallon tilting	FMV	40,000.00

Continuation Sheet for Official Form 206 A/B**steam kettles**

TENNANT T500 walk behind floor machine w/charger, Hrs:23	FMV	5,000.00
2022 CLEAVER BROOKS ClearFire-IT CFH-700 60 hp skid mounted natural gas steam boiler, FALCON controls, FSV-65, s/n:6010142	FMV	70,000.00
Two COLD SHOT CHILLERS ACWC-240-EM skid mounted water chiller, s/n:M030315-5; s/n:M121222-3	FMV	45,000.00
Group of case tapers, mixer/grinder, smoker, kettle, food dicers, jacketed tank, CIP machine, S/S 3-compartment sinks, flex conveyors, hopper, mixer. Coolers & misc. kitchen supplies	FMV	49,000.00
2022 MARATHON V6030HD 60"x30" hydraulic cardboard baler, s/n:51636682	FMV	12,500.00
SULLIVAN Palatek C-15 15 hp rotary screw air compressor w/MIKROPOR SDE-US-65 air dryer & vertical receiver tank, s/n:15D201512	FMV	6,500.00
Group of (3) CLEVELAND KET12TP tilting steam kettles	FMV	18,000.00
2014 GENIE GS-2632	FMV	7,000.00

Debtor 1

Heritage Specialty Foods, LLC

First Name

Middle Name

Last Name

Case number (if known)

Continuation Sheet for Official Form 206 A/B

26' electric
scissor lift, non
marking ties,
Hrs:426

R&D equipment
(3-door cooler,
single door
freezer, tray
racks, sealer, S/S
tables, carts,
sinks & misc.
kitchen supplies)

FMV

11,000.00

Wash room
equipment (bins,
tables, tubs, pans,
and cooking
supplies)

FMV

6,500.00

Prep kitchen
equipment (tables,
scales, food
processors, wire
racks, carts, sink,
bins,
miscellaneous)

FMV

9,000.00

Fabrication
equipment (tables,
welder, saw,
curtains, drill
press, etc.)

FMV

4,000.00

Miscellaneous
pallet jacks,
pallet racks, and
other storage
equipment

FMV

76,000.00

Kyocera copiers

Unknown

Heritage Specialty Foods, LLC
Schedule A/B, Part 10, Question 62 – Attachment

Debtor holds the following licenses, none of which are believed to have independent monetary value:

- U.S. Dept. of Agriculture PACA License
- Oregon Dept. of Agriculture License AG-L1085306AFP (animal food processor)
- Oregon Dept. of Agriculture License AG-L1007628FP (food processing establishment)
- Oregon Dept. of Agriculture License AG-L1082151NSP (non-slaughtering processor)
- California Dept. of Public Health pet food processor license
- Texas pet food license
- Oregon Dept. of Consumer & Business Services Boiler License - Permit #125122.

Fill in this information to identify the case:Debtor name Heritage Specialty Foods, LLCUnited States Bankruptcy Court for the: District of Oregon

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.**Column A**
Amount of claim
Do not deduct the value of collateral.**Column B**
Value of collateral that supports this claim**2.1** Creditor's name
BFG Corporation**Describe debtor's property that is subject to a lien**
CROWN SX3000-30 3,000 lb cap. walk behind stacker, s/n:10337583\$ Undetermined\$ 3,500.00**Creditor's mailing address**2801 Lakeside Dr.
Suite 212, Deerfield, IL 60015**Creditor's email address, if known**
_____**Date debt was incurred** _____**Last 4 digits of account number** _____**Do multiple creditors have an interest in the same property?**

- ☒ No
- ☐ Yes. Specify each creditor, including this creditor,

Describe the lienAgreement you made**Is the creditor an insider or related party?**

- ☒ No
- ☐ Yes

Is anyone else liable on this claim?

- ☒ No
- ☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

2.2 Creditor's name
The Huntington National Bank**Describe debtor's property that is subject to a lien**
2021 EASTEY ET1610-48 heat tunnel\$ Undetermined\$ Unknown**Creditor's mailing address**1405 Xenium Lane North
PCC180, Minneapolis, MN 55441**Creditor's email address, if known**
_____**Date debt was incurred** _____**Last 4 digits of account number** _____**Do multiple creditors have an interest in the same property?**

- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.

- ☐ Yes. The relative priority of creditors is specified on lines _____

Describe the lienAgreement you made**Is the creditor an insider or related party?**

- ☒ No
- ☐ Yes

Is anyone else liable on this claim?

- ☒ No
- ☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.\$ 3,298,856.51

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.3 **Creditor's name**
U.S. Small Business Administration**Describe debtor's property that is subject to a lien**

Blanket lien

\$148,683.51

\$0.00

Creditor's mailing address10737 Gateway West
#300, El Paso, TX 79935**Creditor's email address, if known****Date debt was incurred****Last 4 digits of account number****Describe the lien**

Agreement you made

Do multiple creditors have an interest in the same property?☒ No☐ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.**Is the creditor an insider or related party?**☒ No☐ Yes**Is anyone else liable on this claim?**☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed☐ Yes. The relative priority of creditors is specified on lines _____**2.4** **Creditor's name**
Zions Bancorporation, N.A. dba The Commerce Bank of Oregon**Describe debtor's property that is subject to a lien**

Inventory, accounts, equipment & general intangibles

\$3,150,173.00

\$3,150,173.00

Creditor's mailing address1 S. Main St.
Salt Lake City, UT 84133**Creditor's email address, if known**

Jason.Ogg@tcboregon.com

Date debt was incurred 04/09/2015**Last 4 digits of account number** various**Describe the lien**

Line of credit, equipment loans, and guaranty liabilities. Secured claim limited to value of collateral with unsecured portion reported on schedule F.

Is the creditor an insider or related party?☒ No☐ Yes**Is anyone else liable on this claim?**☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed☐ Yes. The relative priority of creditors is specified on lines _____

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
Merrick Garland, Atty General 950 Pennsylvania Ave., NW Washington, DC, 20530	Line 2. <u>3</u>	_____
Natalie Wight, U.S. Atty, Dist. of Oregon 1000 SW Third Ave. Suite 600 Portland, OR, 97204	Line 2. <u>3</u>	_____
Tara Schleicher 121 SW Morrison St., 11th Floor Portland, OR, 97204	Line 2. <u>4</u>	_____
U.S. Small Business Administration 409 3rd St., SW Washington, DC, 20416	Line 2. <u>3</u>	_____
	Line 2. <u> </u>	_____
	Line 2. <u> </u>	_____
	Line 2. <u> </u>	_____
	Line 2. <u> </u>	_____
	Line 2. <u> </u>	_____
	Line 2. <u> </u>	_____
	Line 2. <u> </u>	_____
	Line 2. <u> </u>	_____
	Line 2. <u> </u>	_____
	Line 2. <u> </u>	_____

Fill in this information to identify the case:

Debtor Heritage Specialty Foods, LLC

United States Bankruptcy Court for the: District of Oregon

Case number _____
(If known)

☐ Check if this is an amended filing

Official Form 206E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.**2.1 Priority creditor's name and mailing address**

IRS
PO Box 7346
Philadelphia, PA, 19101-7346

As of the petition filing date, the claim is: \$ 0.00

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Total claim

Priority amount

\$ _____

Date or dates debt was incurred

Basis for the claim:

Taxes & Other Government Units

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)**2.2 Priority creditor's name and mailing address**

ODR - Attn: Bankruptcy Unit
955 Center St NE
Salem, OR, 97301

As of the petition filing date, the claim is: \$ 0.00

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

\$ _____

Date or dates debt was incurred

Basis for the claim:

Taxes & Other Government Units

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)**2.3 Priority creditor's name and mailing address**

Regular payroll as detailed in first-day payroll motion

As of the petition filing date, the claim is: \$ Undetermined

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

\$ _____

Date or dates debt was incurred

Basis for the claim:

Wages, Salaries, Commissions

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. ⁴ Priority creditor's name and mailing address

Washington State Dept. of Revenue
2101 4th Ave., Ste. 1400
Attn: Bankruptcy Unit
Seattle, WA, 98121

As of the petition filing date, the claim is:

\$5,405.94

\$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. Priority creditor's name and mailing address

\$ _____ \$ _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) ()

2. Priority creditor's name and mailing address

\$ _____ \$ _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) ()

2. Priority creditor's name and mailing address

\$ _____ \$ _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) ()

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address AAA Engineering LLC 10824 SE Oak, Ste. 118 Milwaukie, OR, 97222-6694 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 273.24
3.2	Nonpriority creditor's name and mailing address Aflac Columbus, GA, 31999 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Employee benefits Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 73.68
3.3	Nonpriority creditor's name and mailing address Airgas USA 259 N. Radnor-Chester Rd. Wayne, PA, 19087 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 350.19
3.4	Nonpriority creditor's name and mailing address Alexis Foods 215 SE Stark St. Portland, OR, 97214 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 1,347.92
3.5	Nonpriority creditor's name and mailing address All Star Labor & Staffing 8100 SW Nyberg St. Tualatin, OR, 97062 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: temporary labor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 20,886.42
3.6	Nonpriority creditor's name and mailing address Alpenrose Dairy 6149 SW Shattuck Rd Portland, OR, 97221 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 7,911.86

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ⁷	Nonpriority creditor's name and mailing address Alpine Food Distributing , Inc. P.O.Box 22529 Milwaukie, OR, 97269	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 58,432.95
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁸	Nonpriority creditor's name and mailing address Amcor Plastics 24815 Network Pl. Chicago, IL, 60673-1248	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 49,165.70
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁹	Nonpriority creditor's name and mailing address American Express National Bank 115 W. Towne Ridge Pkwy. Sandy, UT, 84070	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit Card Debt	\$ 12,577.49
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁰	Nonpriority creditor's name and mailing address Apple Foods 444 SE Caruthers St Portland, OR, 97214	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 21,422.23
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹	Nonpriority creditor's name and mailing address ARAMARK P.O. Box 101179 Pasadena, CA, 91189-0005	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 25,975.22
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹²	Nonpriority creditor's name and mailing address ASA Trading Company 2300 Polvorosa Ave. San Leandro, CA, 94577	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 4,872.02
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ¹³	Nonpriority creditor's name and mailing address B&B Print Source 9040 SW Burnham St. Tigard, OR, 97223	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 412.89
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ¹⁴	Nonpriority creditor's name and mailing address Bakemark USA LLC PO Box 845449 Los Angeles, CA, 90084-5449	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,023.39
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ¹⁵	Nonpriority creditor's name and mailing address Beginright 3708 NE 122nd Ave Portland, OR, 97230	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 38,847.10
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ¹⁶	Nonpriority creditor's name and mailing address Bell Flavors & Fragrances	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 506.10
	Date or dates debt was incurred _____ Last 4 digits of account number _____		

Part 2: Additional Page

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Amount of claim

3. ¹⁷ Nonpriority creditor's name and mailing address

Black's Pest Services
22975 Bland Cir.
West Linn, OR, 97068

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,050.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹⁸ Nonpriority creditor's name and mailing address

Boa Logistics
6041 Bristol Pkwy, Ste 100

Culver City, CA, 90230

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 37,531.80

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹⁹ Nonpriority creditor's name and mailing address

Boxes2Business
10778 SW Manhasset Dr

Tualatin, OR, 97062

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 199.75

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²⁰ Nonpriority creditor's name and mailing address

Carson Oil Co.
3125 NW 35th Ave
Portland, OR, 97210

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,953.92

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²¹ Nonpriority creditor's name and mailing address

Charlie's Produce- Portland
P.O. Box 24606

Seattle, WA, 98124

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 3,480.83

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2: Additional Page

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Amount of claim

3. ²² Nonpriority creditor's name and mailing address

Choi's Kimchi Co
19510 NE San Rafael St

Portland, OR, 97230

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,190.00

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²³ Nonpriority creditor's name and mailing address

Clackamas Garbage Co., Inc
13203 SE 172Nd Ave. Ste 166 #763

Happy Valley, OR, 97086-8738

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,329.08

Basis for the claim: Utilities

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²⁴ Nonpriority creditor's name and mailing address

Classic Foods
817 NE Medrona St.

Portland, OR, 97211

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 9,385.26

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²⁵ Nonpriority creditor's name and mailing address

Clinkscapes Portable Toilets
421 W Main St.
Molalla, OR, 97038

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 179.75

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²⁶ Nonpriority creditor's name and mailing address

Cody Staffing
18291 N Pima Rd Ste 110-389

Scottsdale, AZ, 85255

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 219,036.57

Basis for the claim: temporary labor

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2: Additional Page

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Amount of claim

3. ²⁷ Nonpriority creditor's name and mailing address

Cold Shot Chillers
2730 Maximilian Dr

Houston, TX, 77032

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 24,737.50

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²⁸ Nonpriority creditor's name and mailing address

Colony Products
1931 W Park Ave.

Redlands, CA, 92373

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 25,563.20

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²⁹ Nonpriority creditor's name and mailing address

Columbia Corrugated Box
12777 SW Tualatin-Sherwood Rd

Tualatin, OR, 97062

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 46,900.86

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ³⁰ Nonpriority creditor's name and mailing address

Comcast Business Communications, LLC
1701 John F. Kennedy Blvd.

Philadelphia, PA, 19103

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 4,084.81

Basis for the claim: Utilities

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ³¹ Nonpriority creditor's name and mailing address

Conan's Hot Sauces & Marinades, LLC
15911 NE 83rd

Vancouver, WA, 98682

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 675.00

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2: Additional Page

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Amount of claim

3. ³²	Nonpriority creditor's name and mailing address Corfini Meat & Seafood-Vendor 11040 SW Myslony St., Ste 100 Tualatin, OR, 97062	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 22,010.21
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³³	Nonpriority creditor's name and mailing address Custom Blending Solutions/Nana's Kitchen 1313 Old Bay Rd. Mchenry, IL, 60051	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 15,012.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁴	Nonpriority creditor's name and mailing address Dale Madden P.O. Box 68 Maupin, OR, 97037	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4,770.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Monies Loaned / Advanced Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁵	Nonpriority creditor's name and mailing address Dempsey Corporation 47 Davies Ave. Toronto, ON M4M 2A9 CANADA	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 6,463.32
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁶	Nonpriority creditor's name and mailing address Diamond Marketing P.O. Box 2759 Bell, CA, 90201	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7,858.40
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

3. ³⁷	Nonpriority creditor's name and mailing address DSM Pharmaceuticals 3927 Collection Center Drive Chicago, IL, 60693	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 33,688.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ³⁸	Nonpriority creditor's name and mailing address Dustin D. Lewis 4292 SE Augusta Loop Gresham, OR, 97080	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 99,799.66
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁹	Nonpriority creditor's name and mailing address Earthly Gourmet 2143 SE Lafayette St Portland, OR, 97202	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 1,890.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁴⁰	Nonpriority creditor's name and mailing address Element Materials Technology 12003 NE Ainsworth Circle, Ste. 105 Portland, OR, 97220	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ 12,235.03
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁴¹	Nonpriority creditor's name and mailing address EPackageSupply.com 2401 William L Brooks Dr Evansville, IN, 47725	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 9,408.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

3. ⁴²	Nonpriority creditor's name and mailing address Ernest Packaging Solutions 3099 NE 170th Pl Portland, OR, 97230	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 4,838.40
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁴³	Nonpriority creditor's name and mailing address Evergreen Refreshments 1217 SW 7th St., Ste 110 Renton, WA, 98057	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 4,090.45
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁴⁴	Nonpriority creditor's name and mailing address Fill Tech Inc 11401 Belcher Road S 230 Largo, FL, 33773	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 101,250.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁴⁵	Nonpriority creditor's name and mailing address Fisher Construction Group, Inc. 625 Fisher Ln Burlington, WA, 98233	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Damages incurred due to landlord breach of lease Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 425,191.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁴⁶	Nonpriority creditor's name and mailing address Flavorchem 271 Calle Pintoresco San Clemente, CA, 92672	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 399.47
	Date or dates debt was incurred _____ Last 4 digits of account number _____		

Part 2: Additional Page

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Amount of claim

3. ⁴⁷ Nonpriority creditor's name and mailing address

FoodGuys
P.O. Box 3823

Seattle, WA, 98124-3823

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 20,408.47

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁴⁸ Nonpriority creditor's name and mailing address

Fra' Mani Handcrafted Foods
1311 8th St.
Berkeley, CA, 94710

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 43,657.18

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁴⁹ Nonpriority creditor's name and mailing address

Garden Fresh Foods Inc
14316 NE 203rd St

Woodinville, WA, 98072

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 51,356.40

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁵⁰ Nonpriority creditor's name and mailing address

Geffen Mesher & Company, P.C.
P.O. Box 4691

Portland, OR, 97208-4691

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 22,500.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁵¹ Nonpriority creditor's name and mailing address

Gilco Ingredients
P.O. Box 841455

Los Angeles, CA, 90084-1455

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 29,250.00

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2: Additional Page

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Amount of claim

3. ⁵²	Nonpriority creditor's name and mailing address GLISS 10998 SW 68th Pkwy Portland, OR, 97223-8691	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 68,803.93
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁵³	Nonpriority creditor's name and mailing address Go Roam Free Inc. 577 Wilks Gulch Rd Hot Springs, MT, 59845	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 13,289.74
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁵⁴	Nonpriority creditor's name and mailing address Grainger P.O. Box 419267 Kansas City, MO, 64141-6267	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 606.86
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁵⁵	Nonpriority creditor's name and mailing address Harris and Ford 9307 East 56th St Indianapolis, IN, 46216	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 296.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁵⁶	Nonpriority creditor's name and mailing address HealthEquity 15 W. Scenic Pointe Dr., Ste 100 Draper, UT, 84020	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 5,888.67
	Date or dates debt was incurred _____ Last 4 digits of account number _____		

Part 2: Additional Page

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Amount of claim

3. ⁵⁷	Nonpriority creditor's name and mailing address Heidi Ho Foods 7864 SE 15th Ave. Portland, OR, 97202	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 4,693.63
3. ⁵⁸	Nonpriority creditor's name and mailing address Heidi K Lovig 7864 SE 15th Ave. Portland, OR, 97202	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 23,751.08
3. ⁵⁹	Nonpriority creditor's name and mailing address Heritage Logistics Company, LLC P.O. Box 301277 Portland, OR, 97294	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Debt owed to affiliate Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 624,839.20
3. ⁶⁰	Nonpriority creditor's name and mailing address Higher Taste P.O. Box 313 Gaston, OR, 97119	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 1,440.00
3. ⁶¹	Nonpriority creditor's name and mailing address Hygiena 1801 W Olympic Blvd Pasadena, CA, 91199-2007	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date or dates debt was incurred _____ Last 4 digits of account number _____	\$ 7,844.05

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ⁶² Nonpriority creditor's name and mailing address

Ideal Sales & Services Inc.
28642 S Hult Rd.
Beavercreek, OR, 97004

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,087.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁶³ Nonpriority creditor's name and mailing address

J & D Refrigerated Services
P.O. Box 1605

Clackamas, OR, 97015

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 11,882.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁶⁴ Nonpriority creditor's name and mailing address

Kemin Nutrisurance
4017 Paysphere Circle
Chicago, IL, 60674

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 7,217.05

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁶⁵ Nonpriority creditor's name and mailing address

Kettle Cuisine
17711 NE Riverside Pkwy
Portland, OR, 97230

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 14,154.40

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁶⁶ Nonpriority creditor's name and mailing address

KOOL PAK LLC, c/o Tab Bank
P.O. Box 150335
Ogden, UT, 84415-0335

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 6,863.46

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ⁶⁷ Nonpriority creditor's name and mailing address

Los Roast LLC
6635 N Baltimore Ave., Ste 40
Portland, OR, 97203

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,984.00

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁶⁸ Nonpriority creditor's name and mailing address

LTS Sales
P.O. Box 29053
Washington, DC, 20017

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 21,864.15

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁶⁹ Nonpriority creditor's name and mailing address

Mark Ryan Wineries

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 9,292.80

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁷⁰ Nonpriority creditor's name and mailing address

McIlhenny Company / Hael Sales
P.O. Box 679507
Dallas, TX, 75267-9507

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,380.15

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁷¹ Nonpriority creditor's name and mailing address

MedoSweet Farm, Inc
P.O. Box 749
Kent, WA, 98035-0749

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 171,852.03

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ⁷² Nonpriority creditor's name and mailing address

Meridian Scale
8702 South 222nd St

Kent, WA, 98031

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 778.00

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁷³ Nonpriority creditor's name and mailing address

Metal Fabrication
14305 SW Millikan Way

Beaverton, OR, 97005

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 26,185.70

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁷⁴ Nonpriority creditor's name and mailing address

Metro Safety & Fire, Inc
P.O. Box 33650

Portland, OR, 97292-3650

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 852.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁷⁵ Nonpriority creditor's name and mailing address

MN Certification, LLC
P.O. Box 7410296

Chicago, IL, 60674-0296

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 9,421.18

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁷⁶ Nonpriority creditor's name and mailing address

Morasch's Meats
4050 NE 158th Ave.

Portland, OR, 97230

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 88,865.70

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.⁷⁷ Nonpriority creditor's name and mailing address

Nates Fine Food
8880 Industrial Ave, Ste 100

Roseville, CA, 95678

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 79,582.08

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3.⁷⁸ Nonpriority creditor's name and mailing address

National Frozen Food
606 Oakesdale Ave SW, Ste C201

Renton, WA, 98057

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 20,518.41

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3.⁷⁹ Nonpriority creditor's name and mailing address

Nether Industries
1633 Commerce St

Enumclaw, WA, 98022

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 9,202.24

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3.⁸⁰ Nonpriority creditor's name and mailing address

Next Phase
4020 East Indian School Rd

Phoenix, AZ, 85018

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 35,240.53

Basis for the claim: commissions

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3.⁸¹ Nonpriority creditor's name and mailing address

NorthWest Handling Systems
18008 NE Airport Way

Portland, OR, 97230

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 4,343.46

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.⁸² Nonpriority creditor's name and mailing address

Oregon Dept of Consumer & Business Affairs
c/o Ellen Rosenblum, Atty General
1162 Court St. NE
Salem, OR, 97301-4096

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 112.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3.⁸³ Nonpriority creditor's name and mailing address

Oregon Spice Company
5441 NE 148th Ave, Ste 101

Portland, OR, 97230-3456

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 6,212.51

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3.⁸⁴ Nonpriority creditor's name and mailing address

Oregon Tilth
P.O. Box 368

Corvallis, OR, 97339

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 734.90

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3.⁸⁵ Nonpriority creditor's name and mailing address

Orient Electric Inc
30532 SE Bluff Rd

Gresham, OR, 97080

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 3,763.59

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3.⁸⁶ Nonpriority creditor's name and mailing address

Pacific Coast Fruit Company
P.O. Box 1659

Portland, OR, 97207

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 7,528.75

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.⁸⁷ Nonpriority creditor's name and mailing address

Pacific Food Distributors
P.O. Box 2810

Clackamas, OR, 97015

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 7,143.16

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3.⁸⁸ Nonpriority creditor's name and mailing address

Pak West Paper & Packaging
4042 W. Garry Ave

Santa Ana, CA, 92704-6300

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 17,313.05

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3.⁸⁹ Nonpriority creditor's name and mailing address

PermaCold Engineering, Inc.
2945 NE Argyle St

Portland, OR, 97211

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 864.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3.⁹⁰ Nonpriority creditor's name and mailing address

Persing Professional Group, LLC
660 Sierra Rose Dr., Ste A

Reno, NV, 89511

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 34,800.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3.⁹¹ Nonpriority creditor's name and mailing address

Platt Electric
P.O. Box 418759

Boston, MA, 02241-8759

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,461.53

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<p>3. ⁹² Nonpriority creditor's name and mailing address</p> <p>Robert Slezak 16946 SW Wilsonville Rd. Wilsonville, OR, 97070</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ 90.00</p>
<p>3. ⁹³ Nonpriority creditor's name and mailing address</p> <p>Rose's Equipment & Supply, Inc. 207 SE Clay St Portland, OR, 97214</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Suppliers or Vendors</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ 1,176.24</p>
<p>3. ⁹⁴ Nonpriority creditor's name and mailing address</p> <p>SAIF Corp. 2 Centerpointe Dr., Ste 400 Lake Oswego, OR, 97035</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Insurance</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ 6,789.15</p>
<p>3. ⁹⁵ Nonpriority creditor's name and mailing address</p> <p>Santiam Ice Company 17823 S. Nestle Ln Oregon City, OR, 97045</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Suppliers or Vendors</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ 37,530.00</p>
<p>3. ⁹⁶ Nonpriority creditor's name and mailing address</p> <p>Semya LLC PO Box 301277 Portland, OR, 97294</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: debt owed to affiliate</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ Undetermined</p>

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ⁹⁷ Nonpriority creditor's name and mailing address

Sensient Colors LLC

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 3,024.38

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. ⁹⁸ Nonpriority creditor's name and mailing addressSensitech
P.O. Box 742000

Los Angeles, CA, 90074-2000

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 395.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. ⁹⁹ Nonpriority creditor's name and mailing addressShane Hendren
6433 SE Lake Rd.

Milwaukie, OR, 97222

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 4,414.50

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. ¹⁰⁰ Nonpriority creditor's name and mailing addressSilva Sausage
5935 Rossi Ln

Gilroy, CA, 95020

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,700.00

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. ¹⁰¹ Nonpriority creditor's name and mailing addressSoup Bases Loaded
2355 E Francis St

Ontario, CA, 91761

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 25,573.13

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹⁰² Nonpriority creditor's name and mailing address

Southeastern Mills dba Summit Hill Foods
P.O. Box 743056

Atlanta, GA, 30374-3056

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 10,540.00

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹⁰³ Nonpriority creditor's name and mailing address

SP Provisions
2331 NW 23rd Ave.

Portland, OR, 97210

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 4,294.05

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹⁰⁴ Nonpriority creditor's name and mailing address

Speedy Septic
P.O. Box 297

Eagle Creek, OR, 97022

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,419.20

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹⁰⁵ Nonpriority creditor's name and mailing address

Spice Jungle
10451 Northland Dr. NE

Rockford, MI, 49341

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 13,994.92

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹⁰⁶ Nonpriority creditor's name and mailing address

Supherb Farms
P.O. Box 7739

San Francisco, CA, 94120-7739

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,698.87

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹⁰⁷	Nonpriority creditor's name and mailing address Sysco Portland, Inc. P.O. Box 2210 Wilsonville, OR, 97070	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,006.30
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ¹⁰⁸	Nonpriority creditor's name and mailing address T.Marzetti Company 380 Polaris Pkwy, Ste. 400 Westerville, OH, 43082	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: trade Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 21,767.36
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ¹⁰⁹	Nonpriority creditor's name and mailing address Taylor Made Labels P.O. Box 1000 Dept. 148 Memphis, TN, 38148-0148	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 31,797.83
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ¹¹⁰	Nonpriority creditor's name and mailing address TCI Business Capital c/o NW Employment Solutions P.O. Box 9149 Minneapolis, MN, 55480-9149	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Temporary staffing services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 40,153.76
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ¹¹¹	Nonpriority creditor's name and mailing address Toyota Financial Services P.O. Box 22171 Tempe, AZ, 85285	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 795.35
	Date or dates debt was incurred _____ Last 4 digits of account number _____		

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹¹² Nonpriority creditor's name and mailing address

Trouw Nutrition
115 Executive Dr
Highland, IL, 62249

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,248.32

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. ¹¹³ Nonpriority creditor's name and mailing address

ULINE
P.O. Box 88741
Chicago, IL, 60680-1741

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,753.56

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. ¹¹⁴ Nonpriority creditor's name and mailing address

USDA-Food Safety & Inspection Svc
P.O. Box 979001
St. Louis, MO, 63197-9001

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,160.07

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. ¹¹⁵ Nonpriority creditor's name and mailing address

Victoria Pacific Trading Corp
12780 Schabarum Ave
Irwindale, CA, 91706

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 32,701.38

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

3. ¹¹⁶ Nonpriority creditor's name and mailing address

Vita-Pakt Citrus Products Company
4825 Calloway Dr., Ste. 102
Bakersfield, CA, 93312

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 3,543.14

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

Last 4 digits of account number

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹¹⁷ Nonpriority creditor's name and mailing address

Walter E Nelson Co.
5937 N. Cutter Circle

Portland, OR, 97217

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 37,410.60

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹¹⁸ Nonpriority creditor's name and mailing address

Waste Management of Oregon
P.O. Box 541065

Los Angeles, CA, 90054-1065

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 352.79

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹¹⁹ Nonpriority creditor's name and mailing address

Wells Fargo Bank, NA
101 N. Phillips Ave.

Sioux Falls, SD, 557104

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 597.96

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹²⁰ Nonpriority creditor's name and mailing address

Wells Fargo Equipment Finance, Inc.
600 South 4th St., 10th Floor
MAC N9300-100
Minneapolis, MN, 55415

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 337.62

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹²¹ Nonpriority creditor's name and mailing address

Wessco
211 NE Columbia Blvd

Portland, OR, 97211

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,490.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹²² Nonpriority creditor's name and mailing address

Western Boxed Meat
2401 NE Argyle St.

Portland, OR, 97211

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 18,695.50

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹²³ Nonpriority creditor's name and mailing address

Willis Marketing
4041 Ruston Way, Ste 201

Tacoma, WA, 98402

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 31,145.65

Basis for the claim: commissions

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹²⁴ Nonpriority creditor's name and mailing address

Woodland Foods
3751 Sunset Ave.

Waukegan, IL, 60087

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 40,019.61

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹²⁵ Nonpriority creditor's name and mailing address

Zions Bancorporation, N.A. dba The Commerce
Bank of Oregon
1 S. Main St.
Salt Lake City, UT, 84133

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,033.58

Basis for the claim: Credit Card Debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹²⁶ Nonpriority creditor's name and mailing address

Zions Bancorporation, N.A. dba The Commerce
Bank of Oregon
1 S. Main St.
Salt Lake City, UT, 84133

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 809,847.00

Basis for the claim: Monies Loaned / Advanced

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1. IRS Attn: Attorney General of United States 950 Pennsylvania Ave. NW Washington, DC, 20530	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.2. IRS Attn: Civil Process Clerk U.S. Attorney, District of Oregon 1000 SW 3rd, #600 Portland, OR, 97204	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.3. ODR c/o Ellen Rosenblum, Attorney General Oregon Department of Justice 1162 Court St. NE Salem, OR, 97301	Line <u>2.2</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.4. Platt Electric 10605 SW Allen Blvd. Beaverton, OR, 97005	Line <u>3.91</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.1. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.5. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.6. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.7. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.8. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.9. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.10. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.11. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____

Part 4:

Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts		
5a. Total claims from Part 1	5a.	\$ 5,405.94
5b. Total claims from Part 2	5b. +	\$ 4,087,902.53
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$ 4,093,308.47

Fill in this information to identify the case:

Debtor name Heritage Specialty Foods, LLC

United States Bankruptcy Court for the: District of Oregon

Case number (if known): _____ Chapter 11

☐ Check if this is an amended filing

Official Form 206G**Schedule G: Executory Contracts and Unexpired Leases****12/15**

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>2021 Ford F-150 Lessee</p> <p>State the term remaining</p> <p>13 months</p> <p>List the contract number of any government contract</p>	<p>Kendall Ford, Inc. 344 Goodpasture Island Rd. Eugene, OR, 97401</p>
2.2	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>2021 Ford Expedition Max Lessee</p> <p>State the term remaining</p> <p>16 months</p> <p>List the contract number of any government contract</p>	<p>Kendall Ford, Inc. 344 Goodpasture Island Rd. Eugene, OR, 97401</p>
2.3	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Wessco self-contained compactor Lessee</p> <p>State the term remaining</p> <p>49 months</p> <p>List the contract number of any government contract</p>	<p>Wessco 211 NE Columbia Blvd. Portland, OR, 97211</p>
2.4	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Ekko electric pallet jack IK15A-3300 (Lease No. 301-0238126-001) Lessee</p> <p>State the term remaining</p> <p>35 months</p> <p>List the contract number of any government contract</p>	<p>Wells Fargo Equipment Finance, Inc. 600 South 4th St., 10th Floor Minneapolis, MN, 55415</p>
2.5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Eastey automatic sealer combo Lessee</p> <p>State the term remaining</p> <p>12 months</p> <p>List the contract number of any government contract</p>	<p>Regents Capital Corp. 3200 Bristol St., Ste. 400 Costa Mesa, CA, 92626</p>

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

	List all contracts and unexpired leases	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.6	<p>Kyocera copiers (Lease #450-9683801-001) Lessee</p> <p>53 months</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Wells Fargo Equipment Finance, Inc. 600 South 4th St., 10th Floor Minneapolis, MN, 55415</p>
2.7	<p>IR45351i printer (Lease No. 603-0238126-000) Lessee</p> <p>39 months</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Wells Fargo Equipment Finance, Inc. 600 South 4th St., 10th Floor Minneapolis, MN, 55415</p>
2.8	<p>Additional notice party for vehicle leases Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Ford Motor Credit Company LLC c/o CT Corp. System 780 Commercial St. SE, Ste 100 Salem, OR, 97301</p>
2.9	<p>Commercial property lease. Arrearage = 168,790.88. Lessee</p> <p>14 years</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Portland Industrial Owner LLC 10260 SW Greenburg Rd. Suite 170 Portland, OR, 97223</p>
2.10	<p>2022 Toyota Highlander Lessee</p> <p>19 months</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Ron Tonkin Toyota PO Box 4102 Carol Stream, IL, 60197-4102</p>
2.11	<p>Racking equipment Lessee</p> <p>51 months</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Byline Financial BIN 88205 Attn: Accts Receivable Milwaukee, WI, 52388-8205</p>
2.12	<p>2023 Freightliner refrigerated truck Lessee</p> <p>62 months</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Penske PO Box 7429 Pasadena, CA, 91109-7429</p>

Fill in this information to identify the case:Debtor name Heritage Specialty Foods, LLCUnited States Bankruptcy Court for the: District of Oregon

Case number (If known): _____

☐ Check if this is an amended filing**Official Form 206H****Schedule H: Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor**Column 2: Creditor****Name****Mailing address****Name***Check all schedules that apply:*

2.1 Lori Hendren 16946 SW Wilsonville Rd.
Wilsonville, OR 97070 Portland Industrial Owner LLC ☐ D
☐ E/F
☒ G

2.2 Semon Kharif 16946 SW Wilsonville Rd.
Wilsonville, OR 97070 Portland Industrial Owner ☐ D
☐ E/F
☒ G

2.3 Heritage Logistics Cc P.O. Box 301277
Portland, OR 97294 Portland Industrial Owner ☐ D
☐ E/F
☒ G

2.4 Semon Kharif 16946 SW Wilsonville Rd.
Wilsonville, OR 97070 U.S. Small Business Adm ☒ D
☐ E/F
☐ G

2.5 Semon Kharif 16946 SW Wilsonville Rd.
Wilsonville, OR 97070 Zions Bancorporation, N.A. ☒ D
☐ E/F
☐ G

2.6 Lori Hendren 16946 SW Wilsonville Rd.
Wilsonville, OR 97070 Zions Bancorporation, N.A. ☒ D
☐ E/F
☐ G

Fill in this information to identify the case:Debtor name Heritage Specialty Foods, LLCUnited States Bankruptcy Court for the: District of Oregon

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****04/22**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply**Gross revenue**
(before deductions and exclusions)**From the beginning of the fiscal year to filing date:**From 01/01/2023 to Filing date
MM / DD / YYYY☒ Operating a business
☐ Other\$ 6,852,613.42**For prior year:**From 01/01/2022 to 12/31/2022
MM / DD / YYYY☒ Operating a business
☐ Other\$ 20,012,542.71**For the year before that:**From 01/01/2021 to 12/31/2021
MM / DD / YYYY☒ Operating a business
☐ Other\$ 15,245,572.68**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None**Description of sources of revenue****Gross revenue from each source**
(before deductions and exclusions)**From the beginning of the fiscal year to filing date:**From 01/01/2023 to Filing date
MM / DD / YYYYMiscellaneous income\$ 46.79**For prior year:**From 01/01/2022 to 12/31/2022
MM / DD / YYYYMiscellaneous income\$ 71,730.98**For the year before that:**From 01/01/2021 to 12/31/2021
MM / DD / YYYYPPP loan forgiveness\$ 485,497.00

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/23 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <u>All Star Labor & Staffing</u> Creditor's name 8100 SW Nyberg St. Tualatin, OR 97062	03/31/2023	\$ <u>9,574.37</u>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Other</u>
3.2. <u>American Express National Bank</u> Creditor's name 115 W. Towne Ridge Pkwy. Sandy, UT 84070	04/03/2023 03/27/2023 03/20/2023 03/03/2023	\$ <u>24,277.92</u>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Credit Card Debt</u>

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. <u>Heritage Logistics Company, LLC</u> Insider's name PO Box 301277 Wilsonville, OR 97070	_____	\$ <u>1,405,892.77</u>	Intercompany reimbursements (dates of payment: 10/2/22, 12/9/22, 12/31/22, 3/8/23)
Relationship to debtor <u>Affiliate</u>	_____		
4.2. <u>Semya, LLC</u> Insider's name 6433 SE Lake Rd. Portland, OR 97222	6/15/2022 11/17/2022 02/20/2023	\$ <u>279,445.68</u>	Rent (\$70,000) and interest (\$209,445.68).
Relationship to debtor <u>Affiliate</u>			

Debtor Heritage Specialty Foods, LLC
Name _____

Case number (if known) _____

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

	Creditor's name and address	Description of the property	Date	Value of property
5.1.	_____ Creditor's name		_____	\$ _____
5.2.	_____ Creditor's name		_____	\$ _____

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
_____ Creditor's name		_____	\$ _____

Last 4 digits of account number: XXXX- _____

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None

	Case title	Nature of case	Court or agency's name and address	Status of case
7.1.	_____ Case number			<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	_____ Case title		_____ Court or agency's name and address	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	_____ Case number			

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Custodian's name and address	Description of the property	Value
_____	_____	\$ _____
Custodian's name	Case title	Court name and address
_____	_____	_____
Case number	Name	_____
_____	Date of order or assignment	_____
_____	_____	_____

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. <u>Cystic Fibrosis Foundation</u>	Cash donation	9/2021	\$ 2,500.00
Recipient's name		_____	\$ _____
Recipient's relationship to debtor			
none			
9.2. <u>Oregon Food Bank</u>	Cash donation	10/2021	\$ 450.00
Recipient's name		_____	\$ _____
Recipient's relationship to debtor			
none			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss	Value of property lost
Chiller damaged at former leased premises.	33,275.00	9/2022	\$ 43,275.00

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Clyde A. Hamstreet & Associates		05/2023	\$ as disclosed in employment app
	Address One SW Columbia St., Ste. 1575 Portland, OR 97258			

Email or website address

Who made the payment, if not debtor?

As disclosed in employment application

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.	Leonard Law Group, LLC		Apr -Jun 2023	\$ 80,000.00
	Address 4110 SE Hawthorne Blvd., PMB 506 Portland, OR 97214			

Email or website address

Who made the payment, if not debtor?

Semya, LLC paid \$10,000; Semon Kharif paid \$20,000; remainder paid by Debtor

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
			\$ _____
Trustee			

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____		_____	\$ _____
Address _____			
Relationship to debtor _____			
13.2. _____		_____	\$ _____
Address _____			
Relationship to debtor _____			

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy	
14.1. 10527 NE Sandy Blvd. Portland, OR 97220	From 4/2008	To 9/2021
14.2. _____	From _____	To _____

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.1.

Facility name _____

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- ☐ Electronically
☐ Paper

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.2.

Facility name _____

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- ☐ Electronically
☐ Paper

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- ☒ No.
☐ Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

- ☐ No
☐ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
Yes. Does the debtor serve as plan administrator?

☐ No. Go to Part 10.

☒ Yes. Fill in below:

Name of plan

Employer identification number of the plan

Heritage Specialty Foods 401(k) Plan

EIN: _____

Has the plan been terminated?

- ☒ No
☐ Yes

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?
Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	<div>Name</div>	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other		\$
18.2.	<div>Name</div>	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other		\$

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
<div>Name</div>			<input type="checkbox"/> No <input type="checkbox"/> Yes
<div>Address</div>			

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
<div>Heritage Logistics Company, LLC</div> <div>Name</div> <div>8830 SE Herbert Ct.</div> <div>Clackamas, OR 97015</div>		Former storage space of affiliated company	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<div>Address</div>			

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Description of the property	Value
<div>Various customers</div> <div>Name</div>		Debtor holds various recipes and formulations (trade secrets) owned by customers, used by Debtor subj to NDAs.	\$ 0.00

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No
 ☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
<div></div> <div>Case number</div> <div></div>	<div></div> <div>Name</div>		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

☒ No
 ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
<div></div> <div>Name</div>	<div></div> <div>Name</div>		<div></div>

Debtor Heritage Specialty Foods, LLC
Name

Case number (if known) _____

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
_____ Name	_____ Name		_____

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

25.1.	Business name and address Heritage Logistics Company, LLC Name 6433 SE Lake Rd. Portland, OR 97222	Describe the nature of the business logistics	Employer Identification number Do not include Social Security number or ITIN. EIN: <u>47-5259974</u> Dates business existed From <u>10/07/2015</u> To _____
25.2.	Business name and address Semya, LLC Name 6433 SE Lake Rd. Portland, OR 97222	Describe the nature of the business Property leasing	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From <u>03/19/2019</u> To _____
25.3.	Business name and address See Attached SOFA Part 13, Question 25 Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

	Name and address	Dates of service
26a.1.	Geffen Mesher & Co. Name 888 SW 5th Ave., Ste. 800, Portland, OR 97204	From 01/01/2020 To

	Name and address	Dates of service
26a.2.	 Name	From To

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

	Name and address	Dates of service
26b.1.	Geffen Mesher & Co. Name 888 SW 5th Ave., Ste. 800, Portland, OR 97204	From 01/01/2020 To

	Name and address	Dates of service
26b.2.	 Name	From To

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

	Name and address	If any books of account and records are unavailable, explain why
26c.1.	Clyde A. Hamstreet & Associates Name One SW Columbia St., Ste. 1575, Portland, OR 97258	

Name and address**If any books of account and records are unavailable, explain why**

26c.2. Persing Professional Group, LLC
Name
660 Sierra Rose Dr., Ste. A, Reno, NV 89511

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

26d.1. Commerce Bank of Oregon
Name
1 S. Main St., Salt Lake City, UT 84133

Name and address

26d.2. Celtic Capital
Name
10011 Bridgeport Way SW, Ste 1500-208, Lakewood, WA 98499

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☐ No
- ☒ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory**Date of
inventory****The dollar amount and basis (cost, market, or
other basis) of each inventory**

Andrew Harris

Name and address of the person who has possession of inventory records

27.1. Heritage Specialty Foods
Name

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory	
		\$	

Name and address of the person who has possession of inventory records

27.2.
Name

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Semon Kharif	6433 SE Lake Rd., Portland, OR 97222	Member	28.59
Irina Kharif	6433 SE Lake Rd., Portland, OR 97222	Member	16.09
Lori Hendren	6433 SE Lake Rd., Portland, OR 97222	Member	44.68
Shane Hendren	6433 SE Lake Rd., Portland, OR 97222	Member	5.32
Svetlana Slezak	6433 SE Lake Rd., Portland, OR 97222	Member	5.32

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
			_____ To _____
			_____ To _____
			_____ To _____
			_____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No

☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. Alec Hendren Name 6630 NE Mason St. Portland, OR 97218	10,000.00	05/04/2023	Guaranteed payment

Relationship to debtor

Employee & shareholder of affiliate

30.2	Name and address of recipient	<u>139,000.00</u>	Monthly salary of \$13,000, reduced to \$11,000 in April 2023.
	<u>Shane Hendren</u> Name <u>6433 SE Lake Rd.</u> <u>Portland, OR 97222</u>		
	Relationship to debtor		
	<u>Member</u>		

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No
☒ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

Heritage Specialty Foods 401(k) Plan

EIN: _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 06/23/2023
MM / DD / YYYY

X /s/ Shane Hendren

Printed name Shane Hendren

Signature of individual signing on behalf of the debtor

Position or relationship to debtor President & CEO

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☐ No
☒ Yes

Continuation Sheet for Official Form 207**3) Certain payments or transfers to creditors within 90 days before filing this case**

ARAMARK, P.O. Box 101179, Pasadena, CA 91189-0005	\$18,296.06	Suppliers or vendors
Alpenrose Dairy, 6149 SW Shattuck Rd, Portland, OR 97221	\$24,787.38	Suppliers or vendors
Alexis Foods, 215 SE Stark St., Portland, OR 97214	\$9,339.21	Suppliers or vendors
Alpine Food Distributing , Inc., P.O.Box 22529, Milwaukie, OR 97269	\$161,771.79	Suppliers or vendors
Boa Logistics, 6041 Bristol Pkwy, Ste 100, Culver City, CA 90230	\$20,000.00	Services
Clackamas Garbage Co., Inc, 13203 SE 172Nd Ave. Ste 166 #763, Happy Valley, OR 97086-8738	\$21,235.10	Other
Garden Fresh Foods Inc, 14316 NE 203rd St, Woodinville, WA 98072	\$56,266.40	Suppliers or vendors
Taylor Made Labels, P.O. Box 1000 Dept. 148, Memphis, TN 38148-0148	\$20,823.24	Suppliers or vendors
Cody Staffing, 18291 N Pima Rd Ste 110-389, Scottsdale, AZ 85255	\$42,977.67	Other
Dustin D. Lewis, 4292 SE Augusta Loop, Gresham, OR 97080	\$8,487.20	Services
MedoSweet Farm , Inc, P. O. Box 749, Kent, WA 98035-0749	\$157,463.48	Suppliers or vendors
Walter E Nelson Co., 5937 N. Cutter Circle, Portland, OR 97217	\$19,056.83	Suppliers or vendors
Ernest Packaging Solutions, 3099 NE 170th Pl, Portland, OR 97230	\$8,139.73	Suppliers or vendors
J & D Refrigerated Services, P.O. Box 1605, Clackamas, OR 97015	\$25,698.50	Other
Zions Bancorporation, N.	\$54,130.45	Credit card debt

Continuation Sheet for Official Form 207

A. dba The Commerce Bank
of Oregon, 1 S. Main St.,
Salt Lake City, UT 84133

Morasch's Meats, 4050 NE 158th Ave., Portland, OR 97230	\$163,695.98	Suppliers or vendors
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DSM Pharmaceuticals, 3927 Collection Center Drive, Chicago, IL 60693	\$8,400.00	Other
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Soup Bases Loaded, 2355 E Francis St, Ontario, CA 91761	\$26,245.66	Suppliers or vendors
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Zions Bancorporation, N. A. dba The Commerce Bank of Oregon, 1 S. Main St., Salt Lake City, UT 84133	\$51,442.96	Secured debt
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Apple Foods, 444 SE Caruthers St, Portland, OR 97214	\$12,182.52	Suppliers or vendors
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Columbia Corrugated Box, 12777 SW Tualatin-Sherwood Rd, Tualatin, OR 97062	\$9,414.90	Suppliers or vendors
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Zions Bancorporation, N. A. dba The Commerce Bank of Oregon, 1 S. Main St., Salt Lake City, UT 84133	\$284,014.12	Monies loaned / advanced
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GLISS, 10998 SW 68th Pkwy, Portland, OR 97223-8691	\$14,256.17	Suppliers or vendors
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Oregon Spice Company, 5441 NE 148th Ave, Ste 101, Portland, OR 97230-3456	\$12,601.08	Suppliers or vendors
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Pacific Food Distributors, P.O. Box 2810, Clackamas, OR 97015	\$21,353.12	Suppliers or vendors
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Pak West Paper & Packaging, 4042 W. Garry Ave, Santa Ana, CA 92704-6300	\$24,344.64	Suppliers or vendors
--	-------------	----------------------

TCI Business Capital, c/o NW Employment Solutions P.O. Box 9149, Minneapolis, MN 55480-9149	\$20,783.98	Other
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Beginright, 3708 NE	\$10,752.93	Services
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Continuation Sheet for Official Form 207

122nd Ave, Portland, OR
97230

Amcor Plastics, 24815 Network Pl., Chicago, IL 60673-1248	\$21,383.99	Suppliers or vendors
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SAIF Corp., 2 Centerpointe Dr., Ste 400, Lake Oswego, OR 97035	\$18,180.79	Other
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Supherb Farms, P.O. Box 7739, San Francisco, CA 94120-7739	\$9,103.07	Suppliers or vendors
--	------------	----------------------

Blue Buffalo - Vendor Florida Foods Pro, 2231 W CR 44, Eustis, FL 32726	\$19,931.96	
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Multnomah County Tax Collector, PO Box 2716, Portland, OR 97208	\$9,005.90	
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Muzzi Family Farms, 38-A Bluff Rd., Moss Landing, CA 95039	\$9,912.00	
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Precision Graphics of Oregon, 13945 SW Galbreath Dr., Sherwood, OR 97140	\$28,152.57	
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Artctic Commercial Refrigeration,	\$11,918.00	
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Batory Foods West,	\$10,809.47	
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Byline Financial Group,	\$8,899.15	
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Elwood Staffing Services, PO Box 124, Columbus, IN 47202-1024	\$10,635.35	
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Club Demonstration Services, Inc.,	\$62,251.62	
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iFi Gourmet,	\$13,249.65	
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IMCD US Foods Inc., Dept CH19514, Palatine, IL 60055-9514	\$12,521.16	
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Mazda Financial Services,	\$999.10	
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Phillips Gourmet, Inc., 1011 Kaolin Rd., Kennett Square, PA 19348	\$22,110.00	
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Portland Industrial \$296,525.71
Owner, LLC, c/o Specht
Properties 10260 SW
Greenburg Rd., Ste 170,
Portland, OR 97223

Former employee - settlement of employment claim,	\$14,000.00
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6433 SE Lake Rd.
Portland, OR 97222

Debtor Name Heritage Specialty Foods, LLC

Case number (if known) _____

Continuation Sheet for Official Form 207

Amount of money or description: \$74,400.00

Reason: Monthly draws of \$8000 in 2022, increasing to \$9,200 in Feb. 2023.

Name and Address:

Semon Kharif

**6433 SE Lake Rd.
Portland, OR 97222**

Amount of money or description: \$83,096.16

Reason: Mr. Kharif received monthly salary (of \$8,000 and increasing to \$9,200 on February 2023) totaling \$74,400 during the reporting period. During the same period he received an additional \$8,696.16 in lease payments for a vehicle that the Debtor leases from Mr. Kharif.

Heritage Specialty Foods, LLC

Statement of Financial Affairs, Part 13, Question 25.3 – Attachment

Business name and address: NuCulture, LLC (“**NuCulture**”), 6433 SE Lake Rd., Milwaukie, OR 97222

According to the Corporation Division of the Oregon Secretary of State, NuCulture was organized in 2013.

In 2022 and 2023, the Debtor made a series of payments (totaling approximately \$38,586) to satisfy certain obligations of NuCulture. In consideration of these payments, the entire membership interest in NuCulture was assigned to the Debtor in December 2022, with the intent that such interest would be divided and assigned to Lana Slezak and Shane Hendren as part of their compensation for services rendered to the Debtor. Ms. Slezak and Mr. Hendren are currently NuCulture’s members of record, as reflected in the Secretary of State’s records; however, the Debtor has not finalized the accounting entries necessary to correctly reflect the transaction.

Fill in this information to identify the case and this filing:

Debtor Name Heritage Specialty Foods, LLC

United States Bankruptcy Court for the: District of Oregon

Case number (If known): _____

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 06/23/2023
MM / DD / YYYY

X /s/ Shane Hendren
Signature of individual signing on behalf of debtor

Shane Hendren

Printed name

President & CEO

Position or relationship to debtor

AAA Engineering LLC
10824 SE Oak, Ste. 118
Milwaukie, OR 97222-6694

Aflac
Columbus, GA 31999

Airgas USA
259 N. Radnor-Chester Rd.
Wayne, PA 19087

Alexis Foods
215 SE Stark St.
Portland, OR 97214

All Star Labor & Staffing
8100 SW Nyberg St.
Tualatin, OR 97062

Alpenrose Dairy
6149 SW Shattuck Rd
Portland, OR 97221

Alpine Food Distributing , Inc.
P.O.Box 22529
Milwaukie, OR 97269

Amcort Plastics
24815 Network Pl.
Chicago, IL 60673-1248

American Express National Bank
115 W. Towne Ridge Pkwy.
Sandy, UT 84070

Apple Foods
444 SE Caruthers St
Portland, OR 97214

ARAMARK
P.O. Box 101179
Pasadena, CA 91189-0005

ASA Trading Company
2300 Polvorosa Ave.
San Leandro, CA 94577

B&B Print Source
9040 SW Burnham St.
Tigard, OR 97223

Bakemark USA LLC
PO Box 845449
Los Angeles, CA 90084-5449

Beginright
3708 NE 122nd Ave
Portland, OR 97230

BFG Corporation
2801 Lakeside Dr.
Suite 212
Deerfield, IL 60015

Black's Pest Services
22975 Bland Cir.
West Linn, OR 97068

Boa Logistics
6041 Bristol Pkwy, Ste 100
Culver City, CA 90230

Boxes2Business
10778 SW Manhasset Dr
Tualatin, OR 97062

Byline Financial
BIN 88205
Attn: Accts Receivable
Milwaukee, WI 52388-8205

Carson Oil Co.
3125 NW 35th Ave
Portland, OR 97210

Charlie's Produce- Portland
P.O. Box 24606
Seattle, WA 98124

Choi's Kimchi Co
19510 NE San Rafael St
Portland, OR 97230

Clackamas Garbage Co., Inc
13203 SE 172nd Ave. Ste 166 #763
Happy Valley, OR 97086-8738

Classic Foods
817 NE Medrona St.
Portland, OR 97211

Clinkscapes Portable Toilets
421 W Main St.
Molalla, OR 97038

DSM Pharmaceuticals
3927 Collection Center Drive
Chicago, IL 60693

Cody Staffing
18291 N Pima Rd Ste 110-389
Scottsdale, AZ 85255

Dustin D. Lewis
4292 SE Augusta Loop
Gresham, OR 97080

Cold Shot Chillers
2730 Maximilian Dr
Houston, TX 77032

Earthly Gourmet
2143 SE Lafayette St
Portland, OR 97202

Colony Products
1931 W Park Ave.
Redlands, CA 92373

Element Materials Technology
12003 NE Ainsworth Circle, Ste. 105
Portland, OR 97220

Columbia Corrugated Box
12777 SW Tualatin-Sherwood Rd
Tualatin, OR 97062

EPackageSupply.com
2401 William L Brooks Dr
Evansville, IN 47725

Comcast Business Communications, LLC
1701 John F. Kennedy Blvd.
Philadelphia, PA 19103

Ernest Packaging Solutions
3099 NE 170th Pl
Portland, OR 97230

Conan's Hot Sauces & Marinades, LLC
15911 NE 83rd
Vancouver, WA 98682

Evergreen Refreshments
1217 SW 7th St., Ste 110
Renton, WA 98057

Corfini Meat & Seafood-Vendor
11040 SW Myslony St., Ste 100
Tualatin, OR 97062

Fill Tech Inc
11401 Belcher Road S 230
Largo, FL 33773

Custom Blending Solutions/Nana's Kitchen
1313 Old Bay Rd.
Mchenry, IL 60051

Fisher Construction Group, Inc.
625 Fisher Ln
Burlington, WA 98233

Dale Madden
P.O. Box 68
Maupin, OR 97037

Flavorchem
271 Calle Pintoresco
San Clemente, CA 92672

Dempsey Corporation
47 Davies Ave.
Toronto, ON M4M 2A9
CANADA,

FoodGuys
P.O. Box 3823
Seattle, WA 98124-3823

Diamond Marketing
P.O. Box 2759
Bell, CA 90201

Ford Motor Credit Company LLC
c/o CT Corp. System
780 Commercial St. SE, Ste 100
Salem, OR 97301

Fra' Mani Handcrafted Foods
1311 8th St.
Berkeley, CA 94710

Higher Taste
P.O. Box 313
Gaston, OR 97119

Garden Fresh Foods Inc
14316 NE 203rd St
Woodinville, WA 98072

Hygiena
1801 W Olympic Blvd
Pasadena, CA 91199-2007

Geffen Mesher & Company, P.C.
P.O. Box 4691
Portland, OR 97208-4691

Ideal Sales & Services Inc.
28642 S Hult Rd.
Beavercreek, OR 97004

Gillco Ingredients
P.O. Box 841455
Los Angeles, CA 90084-1455

IRS
PO Box 7346
Philadelphia, PA 19101-7346

GLISS
10998 SW 68th Pkwy
Portland, OR 97223-8691

IRS
Attn: Attorney General of United States
950 Pennsylvania Ave. NW
Washington, DC 20530

Go Roam Free Inc.
577 Wilks Gulch Rd
Hot Springs, MT 59845

IRS
Attn: Civil Process Clerk U.S. Attorney,
1000 SW 3rd, #600
Portland, OR 97204

Grainger
P.O. Box 419267
Kansas City, MO 64141-6267

J & D Refrigerated Services
P.O. Box 1605
Clackamas, OR 97015

Harris and Ford
9307 East 56th St
Indianapolis, IN 46216

Kemin Nutrisurance
4017 Paysphere Circle
Chicago, IL 60674

HealthEquity
15 W. Scenic Pointe Dr., Ste 100
Draper, UT 84020

Kendall Ford, Inc.
344 Goodpasture Island Rd.
Eugene, OR 97401

Heidi Ho Foods
7864 SE 15th Ave.
Portland, OR 97202

Kettle Cuisine
17711 NE Riverside Pkwy
Portland, OR 97230

Heidi K Lovig
7864 SE 15th Ave.
Portland, OR 97202

KOOL PAK LLC, c/o Tab Bank
P.O. Box 150335
Ogden, UT 84415-0335

Heritage Logistics Company, LLC
P.O. Box 301277
Portland, OR 97294

Lori Hendren
16946 SW Wilsonville Rd.
Wilsonville, OR 97070

Los Roast LLC
6635 N Baltimore Ave., Ste 40
Portland, OR 97203

LTS Sales
P.O. Box 29053
Washington, DC 20017

McIlhenny Company / Hael Sales
P.O. Box 679507
Dallas, TX 75267-9507

MedoSweet Farm , Inc
P.O. Box 749
Kent, WA 98035-0749

Meridian Scale
8702 South 222nd St
Kent, WA 98031

Merrick Garland, Atty General
950 Pennsylvania Ave., NW
Washington, DC 20530

Metal Fabrication
14305 SW Millikan Way
Beaverton, OR 97005

Metro Safety & Fire, Inc
P.O. Box 33650
Portland, OR 97292-3650

MN Certification , LLC
P.O. Box 7410296
Chicago, IL 60674-0296

Morasch's Meats
4050 NE 158th Ave.
Portland, OR 97230

Natalie Wight, U.S. Atty, Dist. of Oregon
1000 SW Third Ave.
Suite 600
Portland, OR 97204

Nates Fine Food
8880 Industrial Ave, Ste 100
Roseville, CA 95678

National Frozen Food
606 Oakesdale Ave SW, Ste C201
Renton, WA 98057

Nether Industries
1633 Commerce St
Enumclaw, WA 98022

Next Phase
4020 East Indian School Rd
Phoenix, AZ 85018

NorthWest Handling Systems
18008 NE Airport Way
Portland, OR 97230

ODR - Attn: Bankruptcy Unit
955 Center St NE
Salem, OR 97301

ODR c/o Ellen Rosenblum, Attorney General
Oregon Department of Justice
1162 Court St. NE
Salem, OR 97301

Oregon Dept of Consumer & Business Affairs
c/o Ellen Rosenblum, Atty General
1162 Court St. NE
Salem, OR 97301-4096

Oregon Spice Company
5441 NE 148th Ave, Ste 101
Portland, OR 97230-3456

Oregon Tilth
P.O. Box 368
Corvallis, OR 97339

Orient Electric Inc
30532 SE Bluff Rd
Gresham, OR 97080

Pacific Coast Fruit Company
P.O. Box 1659
Portland, OR 97207

Pacific Food Distributors
P.O. Box 2810
Clackamas, OR 97015

Pak West Paper & Packaging
4042 W. Garry Ave
Santa Ana, CA 92704-6300

Santiam Ice Company
17823 S. Nestle Ln
Oregon City, OR 97045

Penske
PO Box 7429
Pasadena, CA 91109-7429

Semon Kharif
16946 SW Wilsonville Rd.
Wilsonville, OR 97070

PermaCold Engineering, Inc.
2945 NE Argyle St
Portland, OR 97211

Semya LLC
PO Box 301277
Portland, OR 97294

Persing Professional Group, LLC
660 Sierra Rose Dr., Ste A
Reno, NV 89511

Sensitech
P.O. Box 742000
Los Angeles, CA 90074-2000

Platt Electric
P.O. Box 418759
Boston, MA 02241-8759

Shane Hendren
6433 SE Lake Rd.
Milwaukie, OR 97222

Platt Electric
10605 SW Allen Blvd.
Beaverton, OR 97005

Silva Sausage
5935 Rossi Ln
Gilroy, CA 95020

Portland Industrial Owner LLC
10260 SW Greenburg Rd.
Suite 170
Portland, OR 97223

Soup Bases Loaded
2355 E Francis St
Ontario, CA 91761

Regents Capital Corp.
3200 Bristol St., Ste. 400
Costa Mesa, CA 92626

Southeastern Mills dba Summit Hill Foods
P.O. Box 743056
Atlanta, GA 30374-3056

Robert Slezak
16946 SW Wilsonville Rd.
Wilsonville, OR 97070

SP Provisions
2331 NW 23rd Ave.
Portland, OR 97210

Ron Tonkin Toyota
PO Box 4102
Carol Stream, IL 60197-4102

Speedy Septic
P.O. Box 297
Eagle Creek, OR 97022

Rose's Equipment & Supply, Inc.
207 SE Clay St
Portland, OR 97214

Spice Jungle
10451 Northland Dr. NE
Rockford, MI 49341

SAIF Corp.
2 Centerpointe Dr., Ste 400
Lake Oswego, OR 97035

Supherb Farms
P.O. Box 7739
San Francisco, CA 94120-7739

Sysco Portland , Inc.
P.O. Box 2210
Wilsonville, OR 97070

Victoria Pacific Trading Corp
12780 Schabarum Ave
Irwindale, CA 91706

T.Marzetti Company
380 Polaris Pkwy, Ste. 400
Westerville, OH 43082

Vita-Pakt Citrus Products Company
4825 Calloway Dr., Ste. 102
Bakersfield, CA 93312

Tara Schleicher
121 SW Morrison St., 11th Floor
Portland, OR 97204

Walter E Nelson Co.
5937 N. Cutter Circle
Portland, OR 97217

Taylor Made Labels
P.O. Box 1000 Dept. 148
Memphis, TN 38148-0148

Washington State Dept. of Revenue
2101 4th Ave., Ste. 1400
Attn: Bankruptcy Unit
Seattle, WA 98121

TCI Business Capital
c/o NW Employment Solutions
P.O. Box 9149
Minneapolis, MN 55480-9149

Waste Management of Oregon
P.O. Box 541065
Los Angeles, CA 90054-1065

The Huntington National Bank
1405 Xenium Lane North
PCC180
Minneapolis, MN 55441

Wells Fargo Bank, NA
101 N. Phillips Ave.
Sioux Falls, SD 557104

Toyota Financial Services
P.O. Box 22171
Tempe, AZ 85285

Wells Fargo Equipment Finance, Inc.
600 South 4th St., 10th Floor
MAC N9300-100
Minneapolis, MN 55415

Trouw Nutrition
115 Executive Dr
Highland, IL 62249

Wells Fargo Equipment Finance, Inc.
600 South 4th St., 10th Floor
Minneapolis, MN 55415

U.S. Small Business Administration
10737 Gateway West
El Paso, TX 79935

Wessco
211 NE Columbia Blvd
Portland, OR 97211

U.S. Small Business Administration
409 3rd St., SW
Washington, DC 20416

Wessco
211 NE Columbia Blvd.
Portland, OR 97211

ULINE
P.O. Box 88741
Chicago, IL 60680-1741

Western Boxed Meat
2401 NE Argyle St.
Portland, OR 97211

USDA-Food Safety & Inspection Svc
P.O. Box 979001
St. Louis, MO 63197-9001

Willis Marketing
4041 Ruston Way, Ste 201
Tacoma, WA 98402

Woodland Foods
3751 Sunset Ave.
Waukegan, IL 60087

Zions Bancorporation, N.A. dba The Commerce B
1 S. Main St.
Salt Lake City, UT 84133

United States Bankruptcy Court
District of Oregon

In re: Heritage Specialty Foods, LLC

Case No.

Chapter 11

Debtor(s)

Verification of Creditor Matrix

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 06/23/2023

/s/ Shane Hendren

Signature of Individual signing on behalf of debtor

President & CEO

Position or relationship to debtor

United States Bankruptcy Court

District of Oregon

In re Heritage Specialty Foods, LLC

Case No. _____

Debtor

Chapter ¹¹ _____

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

☐ FLAT FEE

For legal services, I have agreed to accept \$ _____

Prior to the filing of this statement I have received. \$ _____

Balance Due. \$ _____

☒ RETAINER

For legal services, I have agreed to accept a retainer of \$ 80,000.00The undersigned shall bill against the retainer at an hourly rate of \$ 0.00

[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer. Hourly fees as disclosed in firm's employment application

2. The source of the compensation paid to me was:

☐ Debtor

☒ Other (specify) Semya, LLC (\$10,000); Semon Kharif (\$20,000); remainder paid by Debtor

3. The source of compensation to be paid to me is:

☒ Debtor

☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the Agreement, together with a list of the names of the people sharing the compensation is attached.

5. In return of the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

06/23/2023

/s/ Stephen Raher, 095625

Date

Signature of Attorney

Leonard Law Group LLC

Name of law firm
4110 SE Hawthorne Blvd. PMB #506
Portland, OR 97214-5246

United States Bankruptcy Court

IN RE:

Case No. _____

Heritage Specialty Foods, LLC

Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Registered name and last known address of security holder	Shares (Or Percentage)	Security Class (or kind of interest)
Semon Kharif 6433 SE Lake Rd., Portland, OR 97222	28.59	
Irina Kharif 6433 SE Lake Rd., Portland, OR 97222	16.09	
Lori Hendren 6433 SE Lake Rd., Portland, OR 97222	44.68	
Shane Hendren 6433 SE Lake Rd., Portland, OR 97222	5.32	
Svetlana Slezak 6433 SE Lake Rd., Portland, OR 97222	5.32	